

Submit completed application to:
 Kansas Department of Agriculture
 Division of Water Resources
 Field Office for your area.

Call for address:

Topeka -- (785) 296-5733
 Stafford -- (620) 234-5311
 Stockton -- (785) 425-6787
 Garden City -- (620) 276-2901
<http://agriculture.ks.gov/dwr>

DWR FIELD OFFICE APPLICATION FOR APPROVAL TO CHANGE THE PLACE OF USE AND/OR THE POINT OF DIVERSION



STATE OF KANSAS

WATER METER REQUIRED

Filing Fee Must Accompany the Application, K.S.A. 82a-708b(b), as amended.
 Fee Schedule is on the third page of this application form.

Paragraph Nos. 1, 2, 3 & 5 must be completed. Complete all other applicable portions. If change in point of diversion is greater than 100 feet, or if place of use will be changed, include a topographic map or detailed plat showing the authorized and proposed point(s) of diversion and/or place of use.

File No. 19439

RECEIVED
3:30 PM
FEB 14 2020
 Stafford Field Office
 DIVISION OF WATER RESOURCES

1. Application is hereby made for approval of the Chief Engineer to change the (check one or both):

Place of Use Point of Diversion

under the water right which is the subject of this application in accordance with the conditions described below.

The source of supply is: Groundwater Surface water

2. Name and address of Applicant: Fred Grunder

122 S Main St, Saint John KS 67576-2117

Phone Number: (620)546-3129

Email address: _____

Name and address of Water Use Correspondent: Fred Grunder

122 S Main St, Saint John KS 67576-2117

Phone Number: (620)546-3129

Email address: _____

3. The presently authorized place of use is:

Owner of Land ---- NAME: Fred Grunder

ADDRESS: 122 S Main St, Saint John KS 67576-2117

(If there is more than one landowner, attach supplemental sheets as necessary.)

Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	
30	24S	12W					40	39	39	40									158

4. If this application is for a change in place of use, it is proposed that the place of use be changed to:

Owner of Land ---- NAME: No Change

ADDRESS: ---

(If there is more than one landowner, attach supplemental sheets as necessary.)

Sec.	Twp.	Range	NE¼				NW¼				SW¼				SE¼				TOTAL ACRES
			NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	NE¼	NW¼	SW¼	SE¼	

For Office Use Only: Code _____ Fee \$ 200 TR # 2 Receipt Date _____ Check # 2809

5. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ Quarter of the NC NW Quarter
 of Section 30, Township 24 South, Range 12 W,
 in Stafford County, Kansas, 3960 feet North 3900 feet West of Southeast corner of section.
 Authorized Rate 960 GPM Authorized Quantity 224 AF Depth of well --- 126 (feet)
(DWR use only: Computer ID No. 1 GPS --- feet North --- feet West)
 This point will not be changed This point will be changed as follows: No change, point better described with GPS as follows:
Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)
 One in the SE Quarter of the SE Quarter of the NW Quarter
 of Section 30, Township 24 South, Range 12 W,
 in Stafford County, Kansas, 2757 feet North 2786 feet West of Southeast corner of section.
 Proposed Rate No Change Proposed Quantity No Change Proposed well depth (feet) ~100.
 This point is: Additional Well Geo Center List other water rights that will use this point None.

6. **Presently authorized point of diversion:**
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter
 of Section _____, Township _____ South, Range _____ (E/W),
 in _____ County, Kansas, _____ feet North _____ feet West of Southeast corner of section.
 Authorized Rate _____ Authorized Quantity _____ Depth of well _____ (feet)
(DWR use only: Computer ID No. _____ GPS _____ feet North _____ feet West)
 This point will not be changed This point will be changed as follows: No change, point better described with GPS as follows:
Proposed point of diversion: (Complete only if change is requested or if existing point is better described by GPS)
 One in the _____ Quarter of the _____ Quarter of the _____ Quarter
 of Section _____, Township _____ South, Range _____ (E/W),
 in _____ County, Kansas, _____ feet North _____ feet West of Southeast corner of section.
 Proposed Rate _____ Proposed Quantity _____ Proposed well depth (feet) _____.
 This point is: Additional Well Geo Center List other water rights that will use this point _____.

7. The changes herein are desired for the following reasons?
 (please be specific) Moving well to a location with
better quality of water

8. If a well, is the test hole log attached? Yes No

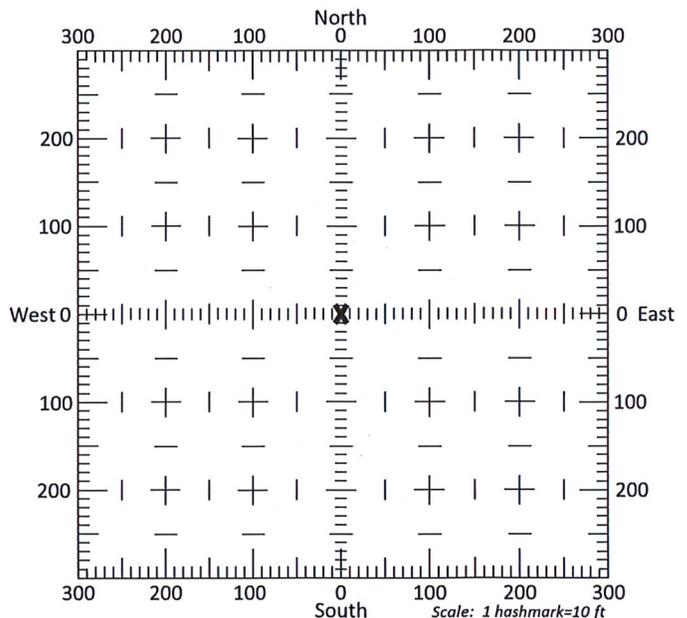
9. The change(s) (was)(will be) completed by?
ASAP

10. If the point of diversion is a well:
 (a) What are you going to do with the old well?
Plug it
 (b) When will this be done? upon completion

11. Groundwater Management District recommendation attached?
 Yes No

12. Assisted by TJS - SFFO

13a. If the proposed point of diversion will be relocated more than 300
feet but within 2,640 feet of the existing point of diversion, attach
 a topographic map or aerial photograph. For groundwater
 sources, show all wells (including domestic) within one-half mile
 of the proposed point of diversion and the names and mailing
 addresses of the owners. For surface water sources, show the
 names and addresses of the landowner(s) one-half mile
 downstream and one-half mile upstream from your property
 lines



13b. If the proposed point of diversion will be relocated within 300 feet
 of the existing point of diversion, indicate its location on the
 diagram shown above in relation to the existing point of
 diversion. (PLEASE NOTE: The "X" in center of diagram
 above represents the presently authorized point of
 diversion.)

FEB 14 2020

Stafford Field Office
 DIVISION OF WATER RESOURCES

14. If the proposed groundwater point of diversion is 300 or fewer feet from the existing point of diversion, complete the following:

- (a) Does the undersigned represent all owners of the currently authorized place(s) of use identified in this application?
 Yes No (If no, all owners must sign this application.)
- (b) Will the ownership interest of any owner of the currently authorized place(s) of use identified in this application be adversely affected if this application is approved as requested?
 Yes No (If yes, all owners must sign this application.)
- (c) If this application is not approved expeditiously, will there be substantial damage to property, public health or safety?
 Yes No (If no, all owners must sign this application.)

If the application proposes a surface water change in point of diversion, a groundwater change in point of diversion greater than 300 feet, or a change in place of use, the application must be signed by all owners of the currently authorized place of use, or their duly authorized agent (attach notarized statement authorizing representation).

I hereby verify, being first duly sworn upon my oath or affirmation and under penalty of perjury, that I am of lawful age and the owner, the spouse of the owner, or a duly authorized agent of the owner(s) to make this application on their behalf, in regards to the water right(s) to which this application pertains. I further verify that the statements contained in this application are true, correct and complete.

Dated at _____, Kansas, this _____ day of _____, 20_____.

Fred Grunder

(Owner)

(Spouse)

Fred Grunder

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

(Owner)

(Spouse)

(Please Print)

(Please Print)

State of Kansas }
County of Stafford } SS

I hereby certify that the foregoing application was signed in my presence and sworn to before me this 14th day of February, 2020



Faith Curtis

Notary Public

My Commission Expires _____

ONLY COMPLETE APPLICATIONS WILL BE PROCESSED. To be complete, all of the applicable portions of the application form must be completed with accurate information; maps, if necessary, must be included; signatures of all the appropriate owners' must be affixed to the application and notarized; and the appropriate fee must be paid.

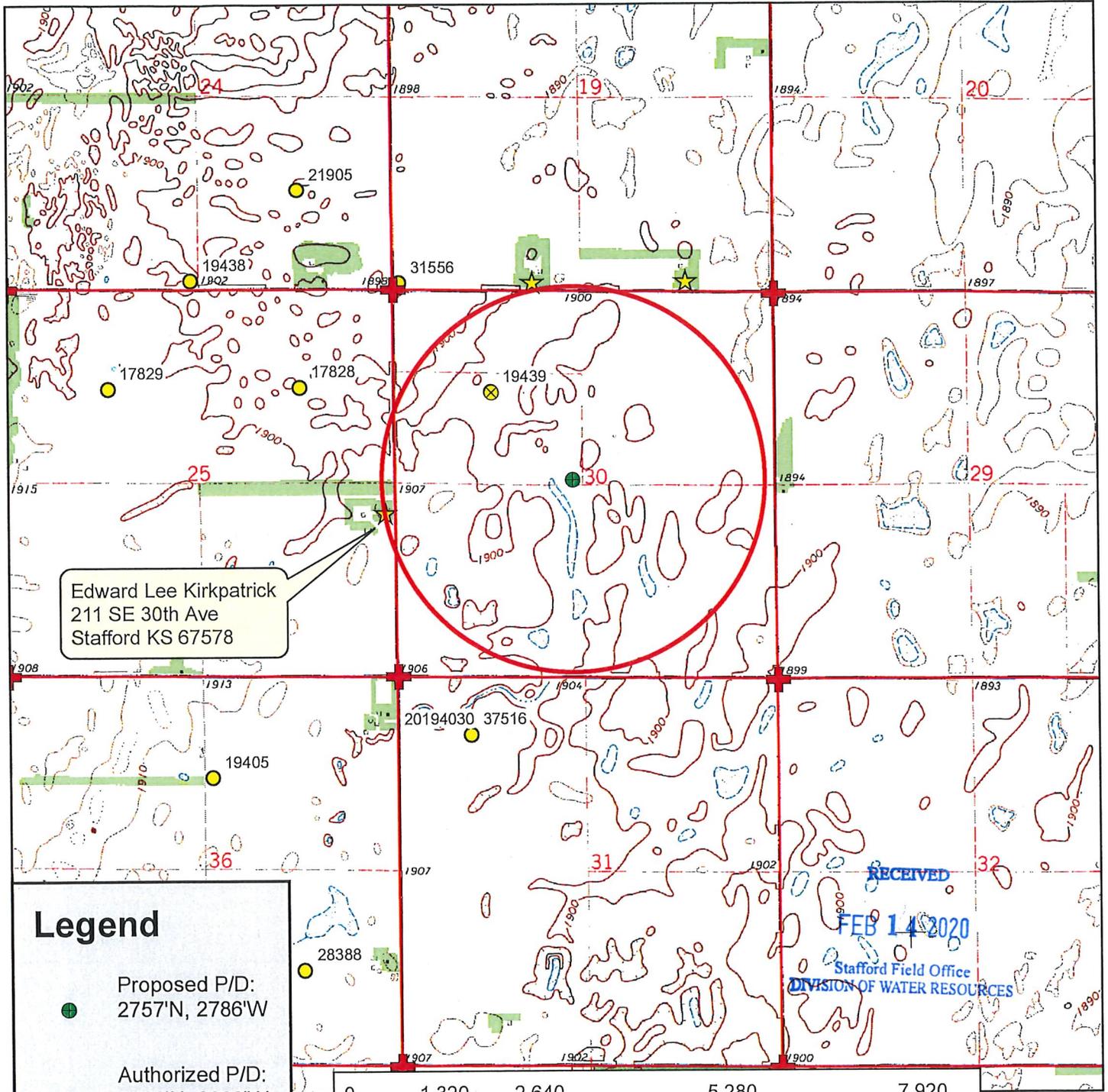
FEE SCHEDULE

Each application to change the place of use or the point of diversion under this section shall be accompanied by the application fee set forth in the schedule below: Make checks payable to: **Kansas Department of Agriculture**

- (1) Application to change a point of diversion 300 feet or less \$100
- (2) Application to change a point of diversion more than 300 feet **RECEIVED** \$200
- (3) Application to change the place of use \$200

FEB 14 2020

**Stafford Field Office
DIVISION OF WATER RESOURCES**

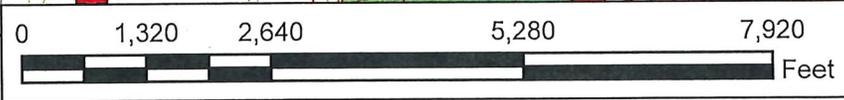


Edward Lee Kirkpatrick
211 SE 30th Ave
Stafford KS 67578

RECEIVED
FEB 14 2020
Stafford Field Office
DIVISION OF WATER RESOURCES

Legend

- Proposed P/D:
2757'N, 2786'W
- ⊗ Authorized P/D:
3960'N, 3900'W
- Water Appropriations
- ⊕ Section Corner
- ▭ Section Line
- ★ Domestic Well
- ▭ 1/2 Mile Buffer



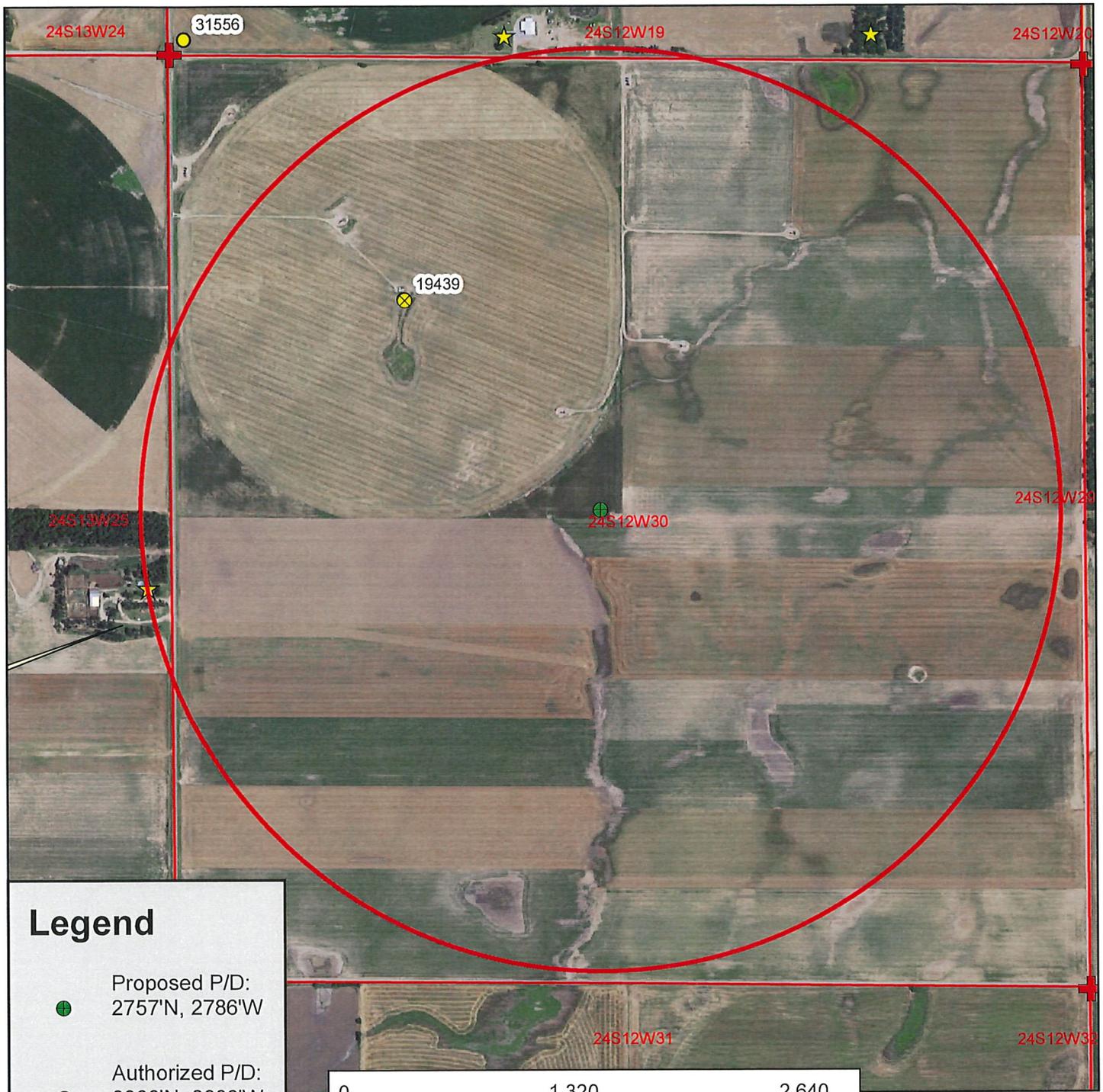
Water Right, File No. 19439
Change in Point of Diversion Application Map
~~25-24S-3W~~ // Stafford County
~~30-24S-3W~~*



To the best of my knowledge, all water wells including domestic, within 1/2 mile of the proposed point of diversion have been shown.

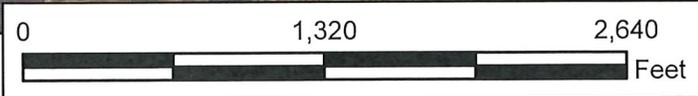
Fred Gundersen

*TJS-SFFO



Legend

- Proposed P/D:
2757'N, 2786'W
- ⊗ Authorized P/D:
3960'N, 3900'W
- Water Appropriations
- + Section Corner
- Section Line
- ★ Domestic Well
- 1/2 Mile Buffer



Water Right, File No. 19439
 Change in Point of Diversion, Aerial Map
 25-24S-3W // Stafford County



File No. 19439

DRILLER'S TEST LOG

Customer Name: Fred Grunder Date: 2/5/2020
Address: _____ Test No: #2-20
County: Stafford Quarter: NW Section: 30 Township: 24 Range: 12

Drilled Footage

Table with columns: From, To, Description of Strata, Indicate Test Location by an X. Includes rows for soil types (Top soil, Sandy tan brown clay, Fine sand, Sandy tan clay, Tan clay w/ gravel streaks, Gravel- small med clean loose, Sandy tan & gray clay, Gravel- small to med w/ clay streaks, Tan clay) and a section for Static Water Level (23 Ft) and Remarks (Set 100ft of 2" pipe. Tested 2 zones. Pulled pipe & plugged test hole.).

ROSENCRANTZ-BEMIS EQUIPMENT CO., INC

Telephone (620) 792-2488 or (620) 793-5512

P.O. Box 713, Great Bend, KS 67530